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**\*BIBDATASHEET\***

Bib Data Sheet

**CONFIRMATION NO. 6408**

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>09/755,383 | <b>FILING OR 371(c) DATE</b><br>01/05/2001<br><b>RULE</b> | <b>CLASS</b><br>345 | <b>GROUP ART UNIT</b><br>2629 | <b>ATTORNEY DOCKET NO.</b><br>IMMR-0029B |
|------------------------------------|---|---------------------|-------------------------------|--|

**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CON of 09/401,044 09/22/1999 PAT 6,191,774  
 which is a CON of 08/881,691 06/24/1997 PAT 6,100,874  
 which is a CIP of 08/560,091 11/17/1995 PAT 5,805,140  
 and is a CIP of 08/756,745 11/26/1996 PAT 5,825,308

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 01/26/2001**

|   |                               |                             |                           |                                |
|---|-------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>23 | <b>TOTAL CLAIMS</b><br>30 | <b>INDEPENDENT CLAIMS</b><br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                               |                             |                           |                                |
| Verified and Acknowledged   | Examiner's Signature          | Initials                    |                           |                                |

**ADDRESS**  
60140

**TITLE**  
FORCE FEEDBACK INTERFACE DEVICE WITH SENSOR

|                                   |   |   |
|-----------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>976 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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